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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket No. (Optional) 20052/1200521-US3	
In re Application of Randolph J. Noelle et al.		Application Number 09/849,969	
Filed May 8, 2001		For: TREATMENT OF T CELL MEDIATED AUTOIMMUNE DISORDERS	
Art Unit 1644		Examiner P. Gambel	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$
<input checked="" type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$ 950.00
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____

☒ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 04-0100.

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record. Registration Number See Limited Recognition

☐ attorney or agent under 37 CFR 1.34(a).
 Registration number if acting under 37 CFR 1.34(a) _____

January 26, 2004
 Date

(212) 836-3747
 Telephone Number

 Signature

Anna Löqvist, Ph.D.
 Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

☐ Total of 1 forms are submitted.

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02 FC:1253

950.00 OP

Express Mail Label No. _____ Dated: _____